It will not, will not rest!—Poor creature, can it be
That 'tis thy mother's heart that is working so in thee?
Things that I know not of perhaps to thee are dear,
And dreams of things which thou canst neither see nor
hear.

Alas! the mountain tops that look so green and fair;—
I've heard of fearful winds and darkness that come there;
The little brooks, that seem all pastime and all play,
When they are angry, roar like lions for their prey.

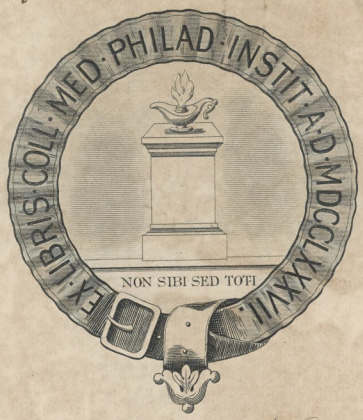
He will not come to thee; our cottage is hard by.
Night and day thou art safe as living thing can be:
Be happy then and rest; what is't that aileth thee?"

WORDSWORTH.

N VIII.

ce of Charity.

, my early youth
parents died—
ritable souls;
mov'd perhaps
ant tears,
ed, to his roof
as the seat
tic cot,
heir wants were few
all men should
—Happy state!
, not gain.
o the field;
each task he took,
well sown on earth,
that awful day,
When all arrears of labour shall be paid
Each well-meant toil rewarded."—Our
I found him busied near a murmuring
To various little streams he
Where, wandering devious through
grounds,
It cheer'd the green copse, fill'd the earing
Then trickled gently through the perfum'd



Shall teach thee Charity. It is a source

Camph. ℈j
Opiumine
Loaf sugar
Gum Arab. ℥j
Cinnamon water
half ~~bottle~~ be taken
at commencement of pain.
the rest in 2 hours
if not relieved

Chapman's Lectures

Volume 8th.

3

Exactly at this conjuncture the vesicating applications are of the greatest utility. As in the inflammatory fevers, the advantage of blisters in this fever also has been denied. Among those who are most opposed to them, are Pringle, Fordyce, & the late Dr. More. But on the other hand, many authors of no less respectability are in favour of their ~~use~~ employment under such circumstances. They are recommended by Cullen; & even in stronger terms by Lind; ~~than~~ whose experience in Typhus Fever is as extensive as that of any practitioner of medicine. If, indeed, there is a point in the practice of medicine so well settled as not to admit of dispute, ~~&~~ I think it is that blisters are advantageous in the sinking stage of all low diseases. They may be applied either to the upper or lower extremities, and, when circumstances are urgent, to both extremities at the same time. It has been held by some authorities, that as the object is merely to sustain the excitement & tone of the system, sinapisms would answer better than blisters because the latter deplete, and thus tend to ~~weaken the system~~ debilitate the patient. But the opinion is entitled to little attention. Blisters make a more per=

manent impression than Sinapisms, and therefore are much more efficacious. It is altogether idle to suppose that they will create debility by their depletory operation: most generally in the low forms of disease they do not vesicate at all, but act merely as rubefacients. But even when they do cause vesication, the effusion is so slight, that it cannot be urged as an objection against their employment.

What shall we say of the use of opium in Typhus Fever. No point of practice has been more controverted than as regards the employment of this medicine. Perhaps it is known to you all that Brown places opium at the head of his class of stimulants, and that he placed his chief reliance on it in the treatment of Typhus Fever. His views were adopted and acted upon by all his disciples, and had great influence in this city, where it was one time fashionable to use opium altogether in the low stages of Typhus. But the propriety of the practice has been questioned by many practitioners, at the head of whom is the celebrated Rodgers. It is stated by him that after a fair trial of the medicine, he had no reason to believe that

it exerted any salutary power over the disease, and most generally he found it to aggravate all the symptoms it was given to relieve. The contrariety of opinion on this subject may, perhaps, be explained on the supposition that opium administered under different circumstances, & in different doses produces different effects. Nothing is better established than that this medicine varies in its ~~effect~~ operation, according to the quantity in which it is administered. In large doses it diminishes at once all the actions of the body, and operates as a direct sedative; so far as diminishing the strength of the body, and paralyzing or crippling its actions, can be called a sedative effect. But in small doses it proves stimulant & cordial, and is calculated to support the actions of the system. In those countries where the use of ardent spirits & wine is prohibited by religious prejudices, opium is resorted to as a substitute. The Turks employ it in abundance, either to exhilerate their spirits, to dissipate their sorrow, or to strengthen & invigorate their fortitude & courage. ~~Its action~~ In this respect it is similar to ~~that of~~ wine, and may be used as a remedy in disease wherever that beverage is indicated.

It follows from the preceding views of the modus operandi & properties of opium, that it may be administered with advantage in this stage of Typhus, in small & repeated doses. It is my practice to give ~~or~~ about a grain every 2 or 3 hours. — But it is alledged that the indications for which we give opium are more successfully answered by other stimulants, particularly by wine. As a general rule I am disposed to think that this is preferable. It is more grateful to the patient; is always a stimulant powerful & diffusible, and at the same time durable in its impression; & moreover affords some degree of nourishment. But there is a choice in wines. If it can be procured Madeira should always be preferred. When this is not to be had, we may find a substitute in Sherry. Of late it has been fashionable to order Claret & the weak French wines. There may be cases in which from idiosyncrasy, or other cause, these might be preferable; but as a general rule Madeira or Sherry are much better adapted to the low states of disease. It is constantly to be borne in mind

* Last year he said a quart

by you that Typhus Fever is characterized by an extreme want of susceptibility to the action of stimulant remedies; and that when we resort to the employment of wine, we should use it liberally. Usually a* pint or more in the course of the day should be given; and cases occur where there is so total a want of susceptibility, that even double or triple the quantity is not too much. But though wine as a general rule is superior to opium, yet there are certain conditions of the body in which this latter article should be resorted to. Of the symptoms which demand the use of opium delirium is the most important. This may arise from excitement or debility of the brain. In the commencement of fever it generally depends on the first of these causes; but in the latter stages it is ~~general~~ always the consequence of atony or debility. It is under circumstances of the latter kind that opium has been found beneficial. No remedy has been found so prompt and successful in delirium accompanying Typhus fever as that just mentioned. Connected with delirium

the patient is affected with a distressing degree of restlessness, anxiety, and vigilance. Here too opium is the appropriate remedy. At this stage of Typhus Fever there is not unfrequently some Diarrhoea. In this affection, opium either alone, or ~~in the~~ combined in the form of a cretaceous julap is the remedy on which we place our chief reliance. —

L. 13 To sustain the strength of the patient at this conjuncture Peruvian Bark has been liberally employed. It seems, however, ~~to~~ at present to have lost much of its former reputation. The evidence of practitioners on this point is exceedingly contradictory. By some the remedy is highly extolled; though a larger number are disposed to detract from its utility, and to condemn its use altogether in this fever. May not this contrariety of sentiment be owing to the employment of the medicine under different circumstances of the disease. It appears to be adapted neither to the early nor to the advanced stage. But the vigilant practitioner by carefully observing the progress of Typhus Fever, will discover a constant tendency to intermit & remit.

decoction with warm
Superintendent added

This often occurs from whatever cause the disease may have proceeded. But when it arises from marsh effluvia, as it generally does in the United States, the tendency is uniformly observable. It is exactly under such circumstances that the Peruvian Bark is beneficial. The stomach, however, is so irritable, that the medicine can rarely be administered in substance. It must therefore be so prepared as to enable us to give it to the patient. The various modes of preparing it, I have so recently told you, that it is unnecessary to recapitulate. But in some instances such is the irritability of the stomach, that bark cannot be administered in any form whatever. When this happens, the best substitute that can be found is the infusion of Serpentaria. This is among the most cordial of our Tonics, and peculiarly well suited to the case before us. — Of late it has become fashionable to prescribe arsenic when there is a tendency to remit or intermit. As yet I have never employed it, believing that it has no power to support the tone of the system, but that it operates by producing debility. I have, therefore, always been apprehensive of its

consequences when used in the Typhus Fever. But you will find that it has been highly recommended by some medical writers. To ~~meet nearly the same~~

To meet nearly the same indications, and especially when nervous symptoms, as tremors, subsultus tendinum, and low delirium exist, a ~~short~~ set of medicines have been strongly recommended, and are not without advantage. ~~Are~~ The Antispasmodics are the remedies to which I allude. The chief of these are musk, castor, and asafoetida. The first is principally employed in, and most generally employed. It may be administered in Boles or Julep. The former is objectionable, as the size of the pill renders it ~~very~~ offensive to the stomach. A formula for making the julep may be found in the Dispensatories; but the following, I think, is preferable.

Take of Musk — ℥ ij.
Loaf sugar — ℥ j.
Gum arabic — ℥ j.
Water — ℔ vi.

The dose is a table-spoon full repeated every hour or 2 according to the emergency of the symptoms. — As res=

pects the use of Castor in Typhus Fever. I have little to say. It has never been employed by me, nor have I ever seen it used by other practitioners. — But Asafoetida, though inferior to Musk is an important remedy in this disease. It has more claims to our notice from the circumstance, that the Apothecaries are in the habit of adulterating musk, and consequently this article cannot be obtained pure. The mode of administering it is in pills, tincture, or watery solution. The last method is the best. —

Take of gum asafoetida ℥ j. —
— hot water ——— ℥ vi.

They are to be rubbed down into a solution. The dose is the same with that of Musk. As commonly stated by writers on Typhus fever, the fœtid articles are possessed of some signal advantages. As might be supposed, they in some cases do seem to quiet nervous tremors & subsultus tendinum, remove delirium, render respiration more easy, and the patient altogether more comfortable. But as a general rule, I am not desirable

* Hoffmann's analysis of laudan-

that in these respects, they do more than opium, or are more to be confided in. But even if they are advantageous only on certain occasions, they ought not, however, to be overlooked. Cases of the same disease assume sometimes a condition, which is relieved by one remedy when the others fail. This happens with Typhus Fever. The symptoms are occasionally alleviated by Musk & asafoetida, when opium will not produce the effect.

At one time no little respect was attached to carbonic acid prescribed in the form of ~~yeast~~ yeast, in the latter stages of Typhus Fever. To this practice physicians were led by the notion of its power in arresting the tendency to putrefaction. But it has been ascertained, that whatever may be the appearance of the disease, putrefaction never takes place in the living body. ~~The determination of this point is~~ The credit of determining this point is due to our University. Indeed, so far is the old notion from being correct, that ~~these~~ the symptoms which were thought to denote ~~putrefaction~~ the existence of this process, are really indication of a contrary tendency. It has been re-

marked, especially in the University of Edinburg, that subjects brought into the dissecting room with vibices, petechiæ, & livid spots on their surface, were less apt to run into putrefaction, than those whose death had been occasioned by inflammatory diseases. – Nevertheless, incorrect as is the theory, the practice is undoubtedly useful. Carbonic acid is among the most cordial & agreeable stimulants. More than many others, it relieves the stomach of nausea, and through the medium of that organ imparts tone to the rest of the body. But it may be administered in a much more pleasant shape than yest, which is commonly recommended. I would prescribe it either in Seltzer water, the Effervescing draught, or Malt liquors; the last of which is the best. Of these Porter is much to be preferred, and when perfectly ripe, is one of our best stimulants or tonics in the low states of disease. In some of the European Hospitals cider is chosen in preference: but, though it may be more pleasant to the patient, it is infinitely less efficacious. If you should, however, have

occasion to administer yeast, you may order a table-spoonfull to be taken every 2 or 3 hours.

With the same view of resisting putrefaction, the mineral acids have been strenuously recommended. It is more than half a century since they were introduced into practice in Great Britain; but the credit of establishing their utility is due to Sir Wm. Fordyce. He first employed them in angina maligna, and was so well satisfied with their efficacy, that he extended them to all the low stages of disease, especially to Typhus fever. His practice, after evacuating the alimentary canal, was to recur to the mineral acids, from which he derived more advantage than from any other mode of management. His reports respecting them are altogether in their favour. To the attestations of Fordyce has been added a large body of evidence which might be cited. But on the continent of Europe, the mineral acids are even more celebrated. During the late war in Germany, the Typhus Fever prevailed to an immense extent in the military hospitals of that country. It was found that the disease was treated much more successfully by Rech

a physician named Recht, than by any other practitioner. So extraordinary, indeed, was his success, that the King of Prussia gave him 50,000 crowns to discover his secret. When this was promulgated, it was found that his practice consisted in the use of the mineral acids. Notwithstanding this weight of testimony, I am not disposed to attach great importance to the remedy. The last accounts are marked by much of that extravagance which always accompanies imposture. Can it be credited that there are any properties in the mineral acids capable of sustaining the strength in the last stages of Typhus Fever. During my residence in Europe I had ample opportunities of observation; & though some refreshing & agreeable effect resulted from their use, yet never did I behold one instance in which they very essentially benefitted the patient. Muriatic acid is that generally prescribed, and the dose is from 10 to 15 drops given in an infusion of Colombo, or other bitter.

As might be expected from the devotion of practitioners to the employment of mercury in the febrile affections, this medicine has not been neglected

in the disease before us. I formerly mentioned that the the intestines became much loaded with feculent matter in the commencement of Syphilis throughs. This being taken away by purges, (and calomel is usually employed,) the system rises in activity. But in the advanced stages of the disease mercury is also used. At this time there are dark incrustations on the tongue, gums, and fauces, and probably through the whole intestinal canal; & the symptoms exist which indicate great danger. Under such circumstances the mercury has of late been strenuously advised to be given in minute doses internally, & to be applied externally by means of frictions. The immediate advantage is the relief of the bowels from their dark incrustations; but this is not all. It is further stated that it acts by exchanging the mercurial fever for the existing condition of the system. I have no personal knowledge with regard to the remedy; but it always appears to me hazardous, & not adapted to urgent cases. If even I should be disposed to try it, I should unite it with stimulant & cordial

medicines. To withold these, & trust to mercury alone, is to knock away the props of an edifice, before the walls are completed. — The treatment of Typhus Fever by general or constitutional remedies is such as I have now stated. But there are certain local effects so urgent as to demand attention. Most of these were considered under the history of the use of opium, as delirium, restlessness, morbid vigilance &c. — I then mentioned that delirium ~~was so~~ may be very successfully managed by opium. But the determination to the head which ~~sometimes~~ frequently exists is so important, that more precision is necessary. All the phenomena of the disease, as well as appearances on dissection show, that the brain if not ~~primarily~~ the ~~ed~~ primary is at least the chief seat of Typhus Fever, or the part on which it spends its force. In the commencement, there is a suffused countenance, and a violent pulsation of the carotid & temporal arteries. In the advanced stage the same thing is indicated by the low delirium, and the great prostration of strength. Dissections reveal to us all the marks of inflammation, and its usual effects. The indication is most plain. It is to relieve the brain by all those means which are calculated to produce such an effect. Nothing is so use-

cessful as topical depletion by ~~the lancet~~ leeches and cupping. It is also useful to remove the hair from the head: by this simple expedient, ~~and this alone~~, I have seen delirium in Typhus Fever ~~o~~ entirely subdued. But when these do not succeed, we must resort to the use of ~~cuta~~ applications; and if these fail, we must place a blister over the whole scalp. — I know that objections have been made to ~~cuta~~ the vesicating applications. But they have no solid foundation; and the propriety of the practice is supported by the whole tenor of medical experience. There are certain points of practice so firmly established as not to admit of dispute; and among these is the employment of blisters in as I have above directed. As well might we deny that mercury is useful in Syphilis, or bark in Intermittent fever, as to say that blistering is of no advantage in the low states of disease. These eccentricities of opinion are common to the human mind, and we have no reason to hope that our science will escape. I dwell more particularly on the subject, because I find that a modern writer very much read by the students in this University, inculcates a doctrine contrary to that which I have

addressed to you.

Taught by the influence of which late experiments have shown the spinal marrow to exert over the animal economy, we should expect to derive great advantage from blisters applied to the spine, especially to the neck. By any interruption of nervous influence from the spinal marrow, respiration, circulation, & the other vital functions are impaired or wholly suspended. Thus in Typhus fever, the respiration, circulation, functions of the stomach, & other great operations of the system are much impeded. This arises from the interruption of nervous influence by the action of the disease. By applying blisters to the spine, there are good grounds to hope that we shall derive great advantage. Nor are facts wanting to justify the practice. It has been lately proved in the Western Indies, that no treatment is so successful as in cases of Tetanus, as blisters to the spine. One writer remarks that fever may be cured in this way.

I have now detailed what may be considered as the medical treatment of Typhus Fever. But this will avail little unless the management, in other respects, be

properly regulated. — It is of the utmost importance to keep the apartment well ventilated. So much is this the case, that when fresh air is admitted into ~~a room~~ the room, the disease almost always assumes a mitigated form. When the advantage of ventilation can not be obtained, it will be proper to remove the patient into another room. This may the more readily be accomplished, as the motion which it occasions is not productive of injury. We are, indeed, informed by Dr. Jackson that the motion of a carriage is one of the best remedies in Typhus fever. — But this change of situation cannot always be commanded; and we must attend to other circumstances. — It is necessary always to pay particular attention to cleanliness. (1st.) The bed-linen, or that of the patient should be changed once every 24 hours. (2nd.) All the excrementitious discharges should be instantly removed. (3rd.) The floor should frequently be sprinkled with vinegar and ardent spirits. (4th.) When the room is exceedingly crowded, fumigations should be employed. These are made by pouring sulphuric acid on common salt; from which the muriatic acid gas is generated. ~~(5th)~~ ~~It is of the~~ It is of the highest importance to exclude

* R. Rudworth.

company. They not only vitiate the air, but also do harm by distracting the mind of the patient. 2

Notwithstanding the full discharge of our duty in all these respects, the disease will sometimes run on, and assume a frightful train of symptoms. But even here we must not abandon our patient. There is no disease in which recoveries take place under apparently such desperate circumstances, as in Typhus Fever. I have seen the patient get well when there was not one favourable symptom. The treatment in this conjuncture is to augment as regards the dose, all the remedies which has been employed in the previous stage. The Volatile alkali should be administered in larger quantities. Wine or ardent spirits should be copiously drunk. It has been the fashion of late to make a liberal use of the cayenne pepper. The Practitioners of the West Indies first employed it in Cynanche maligna, and were so well pleased with its effects in this disease, that they were induced to ~~use~~ use it in the low stages of Typhus Fever. The dose is 8 or 10 grs. at a time, & is administered in the form of pills. It may be repeated every hour, two, or three hours.

Not much advantage is to be gained from Blisters

* Dr Bó [illegible]

at the period of which we are speaking. They rarely draw, and when they do, gangrene and mortification are often the consequence. Much more may be derived from stimulating fractions. Of these the best is cayenne pepper & brandy in the proportion of one part of the former to two or three parts of the latter. I have also seen it recommended to rub the patient with ~~cay~~ a solution of phosphorus in olive oil. Of the latter I know nothing; but in the former I have the highest confidence. You may also use a mixture of Tincture of cantharides, and turpentine; or what is preferred by some a decoction of the flies in this fluid. To prepare the latter boil one ounce of cantharides in 4 or 5 oz. of spirits of Turpentine. This is a very efficacious remedy, and hardly ever fails to act powerfully, at least as a rubefacient.

It often happens in the last stage of Typhus, that the patient becomes so low, as to be unable to swallow. But even here we should not despair. Most of the remedies already enumerated, may be administered by the rectum. This is said to be the ultimum moriens. However this may be, it is undoubtedly true that medicines will act on this part, ~~but~~ when the stomach ~~is not susceptible~~ has become unsusceptible

* If tympanites abdomen
transfusion injections - Even tubes
to withdraw air

to their impression. By injecting opium, musk, wine, and the volatile alkali, we may obtain their full effects. But they should be used in 3 times the quantity in which they are taken into the stomach. — You should neglect no means to substitute a healthy for a diseased action, in order to preserve the life of the patient confided to your care. This is a high and solemn duty. Never let the most alarming symptoms drive you to despair. By perseverance you will sometimes find yourself rewarded when you least expected it. Go on, and call to your aid all the assistance which can be derived from the animal, vegetable, and mineral kingdom; & when these fail, as has been expressed with a holy kind of enthusiasm, invoke the kingdom of heaven itself, without which all your endeavours will be very feeble, impotent, and unavailing. — *

L.

Hectic Fever.

We have now come to that part of our course in which it will be proper to treat of Hectic Fever. — Fevers have been divided by nos into Idiopathic & Symptomatic. Of all the distinctions introduced by nosologists, perhaps this is the most absurd and unprofitable. Every fever, whatever may be its nature, is necessarily secondary & sympathetic. To establish this point we need only recur to the origin of the different febrile affections. The position is admitted without controversy as regards fevers arising from wounds & other injuries. Nor is it less obviously true, as regards those which are caused by innoculation, and the introduction of virus into the system. On the same footing must be placed the similar affections produced by the action of poisons, as arsenic, opium, and the other narcotick and virulent articles. The position then, as I have laid it down, is so far indisputable. But by tracing the phenomena which present themselves, we shall find that it is not less true when applied to what are called Idio-

pathic fevers. Each of these is caused by marsh effluvia, or contagion. It is now a point sufficiently ascertained, that morbid matter can enter into the system in no other way than by being entangled with the saliva, and thus swallowed. Hence it follows that the primary operation is on the stomach, and that the blood-vessels are affected by means of sympathetic connection between that organ & the rest of the system. It must be confessed that there are some who believe that the lungs are the avenue by which these effluvia pass into the system, or the parts on which they operate. But the latter ~~allegation~~ opinion is disproved by the insensibility of those organs to impressions made upon them; and the former by the fact that no one constituent part of the atmosphere is admitted by the lungs. Most conclusive experiments have shown that it is the function of the lungs to throw out matter; & that nothing in the place of what is lost is received by them. But whether this is the case or not, the validity of my hypothesis ~~is not~~ remains unaffected; as ~~still~~ the lungs instead of the stomach would be the point of commencement. My theory of fever is simply this. I suppose that the disease originates in local irritation which spreads itself more or less according to circumstances. Starting from a cen-

tral point it is extended by means of the sympathy of the system with the part in which it was first excited; and when more intense, if not early arrested, diffuses itself by a multiplied chain of associations, till the whole animal economy is to a greater or less degree involved. — These are remarks which I thought proper to make previously to entering on the consideration of Hectic Fever.

This disease is most commonly connected with pulmonary consumption, though other causes sometimes produce it. Whatever greatly irritates the system ~~exc~~ may excite Hectic Fever. Formerly it was generally believed, and is even at present maintained by some that this fever is occasioned by the absorption of matter. But Hunter has shewed that this can not be the case; because it often occurs when there is no abscess, and contrarily, that the largest accumulations of matter frequently do not excite it. Besides Pulmonary consumption, hectic fever accompanies other diseases. — 1st. It is to be met with in what are called white swellings of the joints, and also in Gout & Rheumatism. 2nd. It is seen in scirrous & scrofulous affections, and ulcers in

every part of the body, particularly in the glandular structure, as the mamma, the ovaries, uterus, liver &c. — 3rd. It attends congestion, and obstruction of the viscera, where there is neither abscess, nor ulceration. 4th. It is to be met with in cases of simple irritation, as where there is a stone in the bladder or gall duct, or even where inflammation has resulted from the puncture of a pin or needle. 5th. It sometimes takes place in Pregnancy, merely from the irritation to the general system, occasioned by the gravid uterus. — ~~The~~.

This disease partakes of the type & general nature of Intermittent fever. The two cases have, indeed, so many points of similarity, that they may sometimes be readily confounded. But there are certain circumstances by which they may be distinguished, and as it is of importance in a practical point of view, these should be recollected. 1st. The paroxysm of Hectic fever is rarely regular for any number of days in succession; but after a short time comes on without any established order, at almost every hour of the day & night. 2nd. The paroxysm of Hectic is often not preceded by a chill, and frequently severe rigors are experienced without any hot or sweating stage.

Pulse
Sounds

3rd. The paroxysm of Hectic is not always relieved by perspiration, as chills & flushes continue, though the discharge by the skin, may be copious. 4th. The paroxysm of Hectic in the hot stage is attended with a circumscribed flush on the cheek. 5th. The tongue in Hectic Fever is clean, florid, and sometimes preternaturally polished; but in Intermittents, it is uniformly loaded with fur, either white or of a bilious hue. 6th. The appetite and powers of digestion continue for the most part unimpaired in Hectic fever, and the bowels are in their natural condition; but in Intermittents, there is generally gastric uneasiness, loss of appetite, and constipation of the bowels. 7th. The urine in Hectic fever is turbid during the paroxysm, & pellucid as water in the interval; whereas directly the reverse happens in Intermittents. 8th. The mind of the patient in Hectic fever is proverbially cheerful; while in intermittent there is a good deal of irritation, anxiety, and distrust. It would be easy to point out other circumstances in which the two diseases differ. But those which I have mentioned are the most prominent, and sufficient to form an accurate diagnosis.

As regards the management, Hectic fever does not ~~lift~~ resemble Intermittent, ~~lift than~~ both in ~~the~~ general principles ~~of treatment~~, and in ~~the~~ particular remedies. The treatment divides itself into 2 parts, that which is calculated to prevent the paroxysm, ~~and that~~ which is suited ~~to the~~ intermission or apyrexia. ~~Of the~~ means of prevention opium is confessedly ~~the~~ most efficacious. The concurrent testimony of a large number of practitioners is in its favour. But on account of the great and increasing debility in Hectic fever, we do not follow it up with warm beverages & other means calculated to produce perspiration. – On the same account we should withold those means in the subsequent part of the paroxysm, and should permit the hot & sweating stages to pass off with~~out any~~ little active treatment. – But in the absence of the paroxysm we pursue a different course. We here employ all those remedies which are resorted to in intermittents. But among these there is a choice, and I shall detail such only as have strong claims to our attention. Hectic fever is either inflammatory or otherwise. When there is too much action, as is apt to be the case in the early stage,

the system should always be reduced before tonics are administered. Most generally venesection is indicated; and the blood when drawn under such circumstances, ~~all~~ always presents the appearance of inflammation. Nor will a single bleeding answer; on the contrary, in most instances, the operation should be frequently repeated, though moderate quantities of blood should always be drawn off at a time. — The alimentary canal not being oppressed with accumulations of bile, nor in any respect implicated in hectic fever, evacuations from it are not particularly demanded. But I cannot help believing, influenced by my own observation, that in some cases emetics may be given with utility. They do not operate as evacuants, but on a principle which has hitherto been fully explained. It may be advanced as a rule to which there is probably not a solitary exception, that ~~in~~ all diseases of a periodical nature, or which observe the paroxysmal type, are essentially benefitted by this class of medicines, or, in other words, by repeated ~~or~~ active vomiting.

The system of the patient being now reduced by antiphlogistic measures, we may safely resort to tonics. Of these not the least celebrated is the Peruvian Bark. It was the favourite remedy of Cullen, who spoke of its efficacy without reservation. But, though supported by his authority, & that of many other respectable practitioners, yet I confess that my confidence in Peruvian Bark is not very high. Generally, in my hands, it has proved offensive to the stomach; often ran off by the bowels, & scarcely ever suspended the paroxysm. But I may have failed from circumstances of which I was not aware, & on my report alone, I would not wish that the remedy should fall entirely into discredit. Some have found it beneficial to combine bark with myrrh. But my own experience teaches me that myrrh ~~alone~~ will answer better, when exhibited alone, or differently combined. A celebrated prescription employed much in Hectic fever, and especially when it accompanies Pulmonary consumption, is the following; —

Take of Myrrh — ℥ij.
— Sulphate of iron — ʒi.
— carbonate of Potash — ℥i.
— Sugar — ℥ij.
— Water — ℥vi. vel. v.

The dose is a table-spoon-full every 2, 3, or 4 hours. — Many of the vegetable bitters, as camomile, quassia, gentian, colombo, are better suited to this disease than the Peruvian Bark. Serpentaria, & wild-cherry-tree bark, ~~do~~ however, do more good than any others of this class. The latter is very beneficial. To the large body of evidence in its favour, may be added that derived from my own practice, and from the practice of my medical friends. — Within the last 3 or 4 years, the Uva-ursi has been employed in this case. It was originally introduced by Dr. Bourne a physician of Oxford in England. It has been tried in this city, & not without utility. — It may be supposed that arsenic, which is so valuable a remedy in intermittent fevers, has not been neglected in the disease which now occupies our attention. It has been largely prescribed, and, if we

credit the attestations of respectable physicians, with considerable advantage. My own experience enables me to speak in no high terms relative to arsenic. It has not been much employed by me; but in the few trials I have made of it, I have been disappointed. — Of late the saccharum saturni has not been a little commended in Hectic Fever. It is spoken of by Dr. Irvine of Charleston in the highest terms. Encouraged by my respect for his opinion, I have recently used it in several cases of Hectic Fever, but have not yet derived any advantage. — During my residence in Europe the mineral acids ~~were~~ were much employed in this disease. Of their utility there can be no doubt. The nitric acid is incontestibly ~~the best~~ most efficacious. It has been frequently used by me, and I have always had reason to be satisfied ~~with its~~ of its usefulness. Combined with the liberal use of opiums, it is certainly the most efficacious ~~plan of treatment~~ remedy which can be administered in Hectic Fever. My mode is to ~~administer~~ give as much nitric acid as can be conveniently taken

Little, however, will all these medicines accomplish, unless the patient is placed in a large or freely ventilated apartment. It is not easy to conceive, by those who have not experienced the effect of free ventilation, how important it is to attend to this circumstance. I have known an incipient hectic speedily removed, by placing the patient in a room where the air freely circulated. +

As stated, such is the management of Hectic fever, excited by causes which the surgeon cannot remove. But when the source of irritation may be entirely done away by an operation, or partially removed by the local applications which have a tendency to calm it, these should be resorted to. Such cases, however, come under the province of surgery, or to the ~~prof~~ Professor of that branch, I resign the management of them.

Cancer is my important & riding on horse back I hope to be prepared

Reasons why rupture * ~~often from~~

Stream from nose

Change of position in the lungs

Aneurism of large arteries

Uterine hemorrhage in Pregnancy

Hemorrhoids straining

Vomiting strain

Ulceration of lungs - same as ulcers of other parts when moved

Blow on the chest - falls or often produce hemorrhage from lungs

Ulceration of numerous membranes of lungs

* ~~often~~ Sometimes from irritation alone - Often preceded by irritation which weakens coats - generally from rupture

Hæmorrhages.

3

Season of puberty most common – growth causing redundancy of blood – Early in life generally from arteries – later from veins – mostly venous from hepatic, splenic, gastro-enteritic, & ~~venous~~ hæmorrhoidal capillaries – from arterial from nose, uterus, lungs – Chapman thinks that all genuine hemorrhages arterial, unless melæna – Causes change in ballance of circulation period of maturity – &c. (see manuscript lectures) –

Mode of hæmorrhage by anastomosis – reasons given by Bichat – 1. no traces of rupture 2. In squeezing mucous surface of uterus in women dying during menstruation number of small drops of blood pressed out – 3 hæmorrhages sometimes from skin when undoubtedly from exhalents – 4 if from rupture internal surface of uterus should be a series of cicatrices – 5 if admit in active hemorrhages not in passive – 6 difficulty a supposition that rupture to explain rapidity of production of hæmorrhage – appearance in one part when suppressed in another, & subjection to the influence of sympathy 7. Irregularity, copious flow at one moment, cessation next & so on alternately – 8 – Phenomena not similar to those of hæmorrhages avowedly from rupture – cessation not given rise to others – independent of influence of sympathy, & passions no effect –

Vessels altered, and blood passes where formerly only mucus – Spontaneous hæmorrhages always effusion

& not rupture –

Most writers consider hæmorrhage as active or passive = Former often unequivocally an inflammatory affection – preceding symptoms of fullness or uneasiness or pain, more or less fever, very bloody urine proof = Passive not attended with general excitement – even general debility – but even here local excitement or congestion = Sometimes hæmorrhages do take place from feebleness of vital power, as in malignant fevers

Question whether interfere or not (Manuscript lectures)

Treatment 1st indication to check flow of blood – Means 1. Reduce quantity of circulating fluid by direct depletion either bleeding or leeching or cupping 2. Depress arterial action by refrigerants internal or external – 3 Sedative articles such as reduce force of circulation as digitalis &c. – 4th. constringing mouths of bleeding vessels – Exceedingly doubtful whether have such a set of remedies – astringents only act locally in this way – 5th. revulsion Ø blisters &c. =

2nd. indication to prevent return – Means, removal of causes which dispose to its production diet – & if this not answer evacuants

In passive hæmorrhage in ordinary acceptation of terms – same principles ~~are~~ but means to be graduated to state of case – Prophylactic course – however somewhat different – Invigorate system & equalize circulation by well-

regulated use of tonics & corresponding diet - avoiding anything highly stimulating. Even here local irritations & congestions watched & removed by proper remedies = Much expected from exercise in both kinds - as preventive -

But in treatment of hemorrhages too much attention to arresting flow & not enough to that condition which gives rise to it, & which is by far of the most importance -

In employment of emetics much nicety of discrimination - Inappropriate when high vascular excitement or considerable local congestion or inflamn - Then always ~~pro~~ if employed - to be preceded by depletion -

Dr. C's experience with emetics chiefly in pulmr hemorrhages - In hemorrhage - irregular determination of blood - Emetics first produce afflux to the stomach - secondarily to surface - & thus equalize the circulation - - Moreover Nausea itself useful by repressing arterial action - ~~also~~ emetics known chiefly useful by changing the action in the whole capillary system - Also break up morbid associations.

Prefer Ipecacuanha - tho' sometimes employ tartarized antimony. Follow up

emetic by nauseating doses - & if return suspected, anticipate it by a vomit -

emetics entitled to much confidence than any other remedy in hæmatemesis - given when hæmor. profuse

Has also given in uterine hæmorrhage as also in the other forms -

2nd. Hemorrhages

L. 15 Conformably to my classification of diseases, I now pass from the consideration of fevers, to that of Hemorrhages. – These may with equal propriety be included under the head of disorders of the blood-vessels. The first distinction of hemorrhages was into active & passive. This was ~~first~~ originally introduced by Stahl, & afterwards recognized by Cullen, & other modern writers. Though there is some foundation for the division alluded to, yet the ~~t~~ exact line between the 2 species is not easily discovered. There is another distinction, however, which is deserving of attention. Hemorrhages may be accidental, vicarious, or critical. It is the first kind alone which can be considered as diseases, and demanding medical treatment. The critical discharges of blood are always salutary; and the vicarious are seldom dangerous, unless they happen in the brain, lungs, or other important organs. Cullen defines Active Hemorrhage to be – "Pyrexia, with effusion of blood, independent of external violence." That there is inflammatory action in the case is

*perhaps Maturity

proved by every symptom, as well as by the appearance of the blood. Hemorrhages of this kind are preceded by a sensation of fullness or uneasiness in the part from which the blood is about to flow; and ~~not a~~ ~~There is~~ by not a little heat, swelling, itching, or heat. They are sometimes governed by all the laws of fever, and particularly of those fevers which assume the intermittent type. Hemorrhage is occasionally preceded by a regular chill, and during the hot stage the effusion of blood takes place; and this is repeated for several days or even weeks. As a general rule men are most liable to hemorrhage about the age of puberty. When the body ceases to grow, it does not require all the blood which is elaborated. In early life, the hemorrhage takes place from arteries; but subsequently from the veins; the plethora being turned from the former to the latter set of vessels. This, however, is not a law of universal application. It is well ascertained that in every stage of existence, hemorrhage is venous when it from the liver, spleen, stomach, or hemorrhoidal vessels; but when it takes place from the nostrils or lungs it is as uniformly arterial.

The causes of hemorrhage are exceedingly numerous.

It has already been stated that it is dependent on a change in the balance of the circulation, at the period of maturity. It is also occasioned by local irregularities in the circulation, arising from peculiarities of structure, by which the blood is determined to particular parts. This is exemplified in individuals with short necks & large heads; or with narrow, contracted, ill-shaped chests. Most generally active hemorrhage occurs in persons with full, plethoric habits, and in the spring, or early months of summer. But this is not invariably the case. It is not a rare circumstance to meet with the disease in people who are exceedingly thin & attenuated. But on these occasions, it is caused by congestion arising from the unequal circulation, or distribution of the blood to which I have just alluded. What I have hitherto stated may be considered as the causes of hemorrhage from temperament, or other constitutional peculiarity. To these we may add others, which are accidental, or subordinate, & accessary. The whole of them are calculated to produce irregularities in the circulation, or to divert the blood from its usual

course to any particular part.

1st. Violent exercise by running, leaping, lifting heavy weights; violent gusts of passion; strong venereal appetite not indulged may prove the causes of hemorrhage. —

2d. External heat is another of these causes. It has been supposed ~~that~~ to operate by rarifying the blood; - but this is not, to any extent, an expansible or dilatible fluid. This fact was proved by Sauvage, and confirmed by Haller, who found that blood in a thermometrical tube, at the heat of boiling water was not increased in bulk. That an elevated temperature, however, disposes to Hemorrhage cannot be disputed. Every practitioner must have seen it occur in persons whose occupations confine them to close, heated rooms, or who work over the fire. But heat acts in the first place only as a stimulant to the circulation, and, secondly, relaxes the integuments which give support to the blood-vessels.

3d. Cold to the surface, & particularly to the feet has sometimes proved the cause of hemorrhage. Its mode of operation is perfectly intelligable. Suddenly applied it gives a shock to the system, and an impulse to the circu-

lation, with a centripetal direction. But when cold is gradually applied, it produces an accumulation of susceptibility; and a violent reaction takes place, with febrile excitement on exposure to heat or other stimulating cause.

4th. ~~Another co~~ Diminution in the weight or density of the atmosphere. This is illustrated in those who ascend ~~ascent of~~ elevated situations, & has been imputed to the extraordinary exercise which is ~~taken~~ used on the occasion. But we are told by ~~De Lamp~~ De Saussure that when he ascended the Alps, among other effects, the blood gushed from his nostrils, ears, gums &c. though he used little exertion; all of which is fully confirmed by Humboldt, by whom the mountains of South America were explored to their utmost pinnacle.

With these leading or general causes may be associated a variety of accessary circumstances, such as ligatures on certain parts of the body confining the blood to delicate organs, as neckcloths causing a determination to the nostril, & brain. To the preceding account of the causes, I shall only add such as proceed from accidents, as blows, wounds, falls &c, which, however, belong to the province of surgery.

Treatment. I am next to speak of the cure of these affections. But at the threshold of our inquiries we are met by the Question, whether it is expedient or justifiable in any case of hemorrhage, to interrupt the flow of blood, or whether at all times, and under all circumstances, it should be left entirely to the regulation of nature. The doctrine was originally advanced by Stahl, & supported by respectable authorities, that this disease is owing to an operation of nature in removing dangerous plethora, which being effected, the wound will close, & the hemorrhage thus spontaneously cease. It is unquestionably true, that the doctrine to a certain extent is well founded. Thus syncope is induced, long before an alarming quantity of blood is lost; & this is nature's resource for suppressing the hemorrhage. Nor is it less demonstrable that in certain cases the flow of blood cannot be stopped by art, without inducing, in some instances, the most serious consequences. It is an indisputable fact, that checked hemorrhoidal discharges are very apt to leave behind them a tendency to apoplexy, palsy, mania, head-ache, and other cephalic affections.

This remark is equally applicable to hemorrhage from the nostrils, and to the critical discharges in fever, and many other acute diseases. — We cannot, however, always ~~trust the~~ confide the ~~treatment~~ case to nature; and sometimes it is necessary to take the management entirely out of her hands. Occasionally she is unable to give ~~the blood~~ a proper direction to the discharge. Thus instead of the nostrils, hemorrhoidal vessels or ~~all~~ ~~some~~ other safe part, the head, lungs, or some important organ is affected, and death is the consequence. Nor is it less manifest that nature cannot regulate the quantity proper to be lost; and if a large vessel is ruptured, fainting does not afford the slightest relief. These are the circumstances under which the assistance of art is imperiously demanded, and without which all is necessarily lost.

As preliminary to the treatment of particular hemorrhages, I will now lay down some principles applicable to the whole. The leading indication in all profuse ~~hemorrhage~~ ~~or orrhages~~ hemorrhages is to suppress the flow of blood; & when the case is active & febrile, this is to be ~~done~~ accomplished, 1st. by reducing the quantity of the circulating

fluid by the direct evacuants, - Secondly - by what are called refrigerants. These are external or internal, the former consisting of cold applications, the latter of those medicines properly called refrigerants, and which are principally the neutral salts. Third - By sedative articles, or such as are supposed to reduce the force of the circulation without previous depletion, as Digitalis, Squill, & Tobacco. -

After this indication is accomplished, we are next to astringe the mouths of the bleeding vessels. Whether there are any articles of the Materia Medica which possess this power, is exceedingly problematical. But it is generally imagined that we are in possession of a large class, as the preparations of lead, alum, the mineral acids, besides no small number from the vegetable kingdom.

Another principle in the treatment, is to occasion a revulsion ~~to some other part~~ of the fluid to some other part, less interested in the economy of the system. This is of great importance, and will often prove successful, when the means are judiciously employed. It is customary to resort to pediluvium, or stimulating applications to the extremities. But at all times there are highly equivocal

remedies, & not at all comparable to cupping and the vesicating applications near the seat of the disease.

The second indication is to prevent the recurrence of hemorrhage, by removing the cause which predisposes to its production. As the disease is founded in plethora, it is sufficiently obvious that the most effectual prophylactic ~~reme-dies~~ remedy is such a regulation of diet, as is least calculated to fill the ~~f~~ blood-vessels; and vegetable food, therefore, should be recommended. All other means are merely palliative, and cannot be employed a long time without injury to the system. Thus venaesection affords only temporary relief, & ~~remote~~ when much used it remotely confirms a habit, as pernicious as the ~~p~~ hemorrhage itself. To purges and other evacuants the same remarks ~~are~~ is applicable. Though highly useful in a season of emergency, they should not form a part in the regular & permanent treatment.

Exercise ~~should be used~~ is an excellent auxiliary to a properly regulated diet. It causes an increase in the secretions & excretions from the volume of the blood, and establishes a just equilibrium in the circulation, thus obviating those local congestions & accumulations which

are the immediate cause of hemorrhage.

These are the leading principles on which the management of ~~the case~~ ~~these cases of diseases~~ the disease now under consideration is to be conducted; and which it will be my duty to exemplify & expand, when I come to the treatment of individual cases. —

1. Hæmoptysis or Spitting of blood.

1. By the term Hæmoptysis is meant, hemorrhage ~~at~~ either from the lungs, or trachea, or fauces. It is proper to know that such bleedings are incident to the structure about the throat; and to be acquainted with the symptoms by which they are distinguished. Much uneasiness is thus spared to the patient; and we are enabled to institute the proper treatment, which is essentially different from that adapted to hemorrhage from the lungs. Most generally, when the blood comes from the trachea or fauces, it is discharged by mere hawking, without any cough, oppression, or febrile excitement; and on examination we can sometimes perceive the immediate source. Now and then we shall find that the throat is in-

flamed, though more frequently this is not met with. Notwithstanding what has been said, hemorrhage from these parts, especially from the Trachea, is sometimes of serious importance and deserving of our close attention. My own personal observation, and similar remarks made by other ~~per~~ physicians, convince me, that bleeding which ~~was~~ clearly ~~trace~~ originated from vessels in the trachea, has been the precursor of Pulmonary Consumption. When this happens, it is probable that the lungs are affected, and that the disease action of the parts which gives rise to the hemorrhage, is extended a considerable distance up the wind-pipe. Cases of this kind have often occurred to me in Consumption following Catarrh, and more than once in Tubercular Consumption. But generally such hemorrhages are of comparatively little consequence, though they at all times demand our attention. —

After these remarks we will proceed to hemorrhage from the lungs. In this disease there is a discharge of blood of a florid colour & frothy, brought up with more or less coughing, & readily distinguishable from hematemesis by circumstances hereafter to be enumerated.

All the causes already enumerated as giving rise to hemorrhage generally, also occasion hæmoptysis; but there are some which more particularly conduce to the disease. It is well ascertained that certain peculiarities of structure predispose to it. Of this kind are a narrow, contracted thorax; elevated shoulders; a delicate habit of body; and a sanguineous temperament. But this disposition congenital or acquired, is excited into action by a variety of causes; not the least of which are loud & long speeches; frequent singing; bursts of laughter; paroxysms of rage; violent exercise, especially in lifting heavy weights; vicissitudes of weather; irregular habits, especially of intemperance; and the suppression of some accustomed discharge, as the hemorrhoidal, or catamenial. But, though produced by all the causes just enumerated, still it is an indisputable fact, however wonderful it may appear, that hæmoptysis occurs most frequently at night, when there is the least corporal or mental agitation. Of this I am thoroughly persuaded, that of the cases of Pulmonary Hemorrhage, a very large majority happen under the circumstances just mentioned. What gives rise to the increased predisposition acquired by sleep,

I cannot determine. It is altogether a curious fact, and has never been satisfactorily elucidated or explained. Of Hæmoptysis there are several species arising from different causes, and attended with various degrees of danger.

The 1st. is a mere accidental rupture of a vessel, in consequence of a blow, fall, or wound; and here, if the vessel be small, & no previous disease of the lungs has existed, the hemorrhage is a matter of little moment.

The 2nd. species arises from excessive inflammation of the lungs, as in the early stage of Pleurisy & Peripneumony; and even here, it is not a very serious circumstance.

3rd. Hemorrhage may come on from Metastasis, or the translation of the disease from one part to another, as in the suppression of the hemorrhoidal, or menstrual discharge. When of this nature, it is seldom dangerous, unless there is a predisposition to pectoral complaints, particularly consumption.

4th. It may result from plethora, or accumulations of blood in the lungs, which is relieved by periodical discharges from those organs. Cases of this kind are not

necessarily ~~to~~ connected with full, plethoric habits; but sometimes occur in thin persons, and in valetudinarians; and, though they often terminate in Consumption, yet this is not the universal result. Many instances of prodigious longevity, under such circumstances, have been known to take place. Two or three cases of this kind have fallen under my own observation, and ~~agree~~ a great number might be cited from the various literary, & medical records.

5th. Hæmptysis may occur from abscess or ulceration in the lungs, most generally following ill-cured Pneumonic inflammations; and the discharge is mixed with phlegm, or purulent matter. Even here the danger often subsides, and the patient recovers.

6th. It may also arise from tubercles, associates with a scrofulous diathesis; and though blood is not discharged in great quantities, yet the case generally ~~terminates~~ in Phthisis Pulmonalis, and the patient dies.

The case of Hæmptysis of which we are now to treat, is connected with ~~the~~ signs of arterial action & febrile excitement. It is ushered in by a sense of weight and

oppression at the chest; a dry, hard cough; difficulty of respiration; a full, irregular pulse; and a flushed, turned countenance. It is sometimes preceded by more distinct symptoms of a febrile nature:- as chills, cold extremities, pain in the back & loins, flatulence, constipation, extreme lassitude & debility.

The principal indication is sufficiently obvious, and ~~consists~~ directs, in the first place, the reduction of arterial action. Nothing would seem to answer so well for this purpose as venaesection; but some respectable physicians object against its employment, and among others the celebrate Dr. Heberden of London. He asks how the opening of a vessel by venaesection, can possibly check the flow of blood which has already been ruptured by ~~that~~ an effort of nature. This, however, is a sophism wholly unworthy of that great practical physician. Whatever is the difficulty of explanation, he perfectly well knew that the practice, by long experience had been demonstrated to be useful. But the affair involves no dark enigma. By opening a vein in the arm, we invite an influx of blood to that part, and, on the principle of revulsion, check the hemorrhage from the lungs. But the

solution of the problem is wholly immaterial. The fact is almost universally conceded, and that ought to satisfy us. To be of service, however, in the more violent cases, it is indispensably necessary that the bleedings should be very large. The small & repeated bleedings employed by some practitioners, are idle and always attended with inconvenience. They harrass, and debilitate the patient, without contributing to the cure. My practice, in cases where it is essential promptly to effect ~~a~~ relief, is to take away at once by a large orifice, so much blood as to make a favourable impression, or in other words, completely to check the force of arterial ~~excitement~~ action. Nothing less than this will answer in copious hemorrhages from the lungs.

As soon as ~~this~~ the bleeding is completed, or even while it is going on, it is my custom to direct the common salt, in tea or table-spoon-full doses, according to circumstances, every 10, 15, or 20 minutes. Of the efficacy of this remedy, ~~in hemorrhage~~ though a domestic one, there is no reason to entertain a doubt. Most of the practitioners of this place have high confidence in its powers. Its effects are ~~so~~ very prompt, perhaps more so ~~than~~ those of any

other article. But how it operates is not very intelligable. It is more than probable, that the action excited by it in the fauces, is extended by continuous sympathy to the lungs, and there ~~astringes the acts a~~ proves astringent to the mouths of the bleeding vessels. Nothing is more stiptic than common salt. — As co-operating with this remedy, in critical cases, it is proper to use cold applications to the thorax, & particularly to the arm pits. No part of the body is more susceptible, and particularly to the action of cold, than the axilla. Cloths wet with vinegar, or cold water; or even ice inclosed in a bladder are highly beneficial remedies in checking hemorrhage. It has also been strongly recommended in cases of great emergency, to wrap the whole of the body in sheets wet with vinegar or cold water. This is intrepid practice, & in some instances might prove effectual. It was the favourite remedy of the late Dr. Bond, who has ~~acquired the char.~~ left behind him the character of a bold, and active practitioner. It was also suggested by Dr. Darwin, that in extreme cases, water should be dashed on the body, or the whole person immersed in a cold bath. The danger should be extreme to justify practice of this kind. Now & then

it might prove successful; yet there is reason to suppose, that from the sudden determination of blood from the surface to the internal parts, it would augment the danger which it was ~~[illegible]~~ expected to relieve.

Many of you are aware, that of late it has been customary to treat hæmoptysis by the use of the Sacharum Saturni. This is no new practice. Long ago, it was employed in the different countries of Europe, and was recommended by one or two of the early writers of that continent. But ~~it was~~ in consequence of the reports of Sir George Baker, and other authors about 30 years ago, a ~~panic terror~~ sort of panick terror seized the medical world, and the article was almost totally abandoned. To the late Dr. Barton, a man who should be regarded in this country, and particularly in this University with reverence and respect, in consequence of the additional celebrity which he gave to our institution, and the benefits he conferred on medical science, the credit is most unquestionably due, of dissipating these idle terrors, & fully reestablishing the safety & efficacy of the preparation alluded to. But, perhaps, physicians have now run into the opposite extreme, and too promiscuously

employ the remedy. It is, for the most part, indiscriminately applied to every species of hemorrhage, and ~~from~~ in whatever part of the body it occurs. Nothing is better ascertained than that the use of lead should always be preceded by copious venesection, when fullness & activity of the pulse exist. This remark applies with particular force to hæmptysis. I am entirely convinced, that if the ~~activity of~~ arterial system be not previously reduced, lead will be not only without efficacy, but even injurious. Nor will a single bleeding answer. It is the rule to deplete as long as there is any increased vigour in the circulation; and after this, the lead may ~~seem~~ sometimes, perhaps, prove advantageous. The dose is 2 or 3 grs. combined with a small portion of opium, given every 2 or 3 hrs. It is particularly suitable to hemorrhages originally mild, or which have become so by the previous remedies. To expect that sugar of lead would restrain a large stream of blood from the lungs, is idle, and the person who entertains the opinion, will in practice be disappointed. What would be the effect if a large dose were taken, it would be impossible to state with any precision. It seems to me that it would

accomplish more, and the practice would certainly be safe.
On one occasion a scruple was given by me with no bad effect whatever, though it did not, in the slightest degree, check the discharge of blood. During my residence with ~~Dr. Rush~~, the late Dr. Rush, I knew a woman who swallowed a drachm of this medicine. She had come to the doctor's office, and an ounce of salts to be taken internally, with a drachm of ~~t~~ the sugar of lead as an external application to an ulcer, were given to her. She reversed the direction, swallowed the lead, and applied the salts to her sore. No other effect was experienced than very active purging. There was no coma, no convulsions, no inflammation of the stomach or intestines.

Not a little confidence is, by some practitioners, reposed in alum, as a remedy in hemorrhage. That it is a valuable ~~remedy~~ medicine cannot be disputed. It is among the most active astringents, and promises well in this case. But determining from my own experience I would not ~~put~~ rank it high among the remedies. To profuse hemorrhages it is utterly unsuitable; & were I to prescribe it ~~alt~~ at all,

I should do so, after the hemorrhage had been restrained by bleeding &c., rather to prevent the recurrence of the ~~disease~~ discharge, than to check it. But I shall hereafter point out those cases to which the alum is more particularly adapted.

What, gentlemen, shall I say of Digitalis in the case before us? a remedy, which, for 20 years, has enjoyed the highest esteem of many practitioners. As, when I come to uterine hemorrhage, I shall enter fully into a consideration of the properties of this article, I shall at present detain you with only 2 or 3 remarks on the subject. From its known influence on the circulation, it has been highly extolled as a remedy in active hemorrhage. ~~of any~~ My own experience, however, convinces me, that as a ~~remedy for the~~ substitute for the lancet, or when there is much inflammatory action, it should never be trusted. Even when arterial action has been reduced by direct depletion, it is precarious in its effects, and much inferior to other remedies. In the ordinary dose, a long time elapses before the pulse feels its influence; & if large quantities are given, it endangers

vomiting, which to say the least, is not useful in these cases. Physicians have been in a great error in the practical application of Digitalis to Hæmoptysis. The cases to which it is suitable are such as are accompanied with a slight discharge, hacking cough, pain in the side & breast, a quick active pulse, together with great mobility & weakness of the system. T. bleed is ~~now~~ inadmissible on several accounts; & here it is that a judicious practitioner always resorts to digitalis as a substitute for the lancet. Exhibited under such circumstances, so as just to affect the pulse, and keep it within the natural standard, this remedy will in some cases be of signal advantage. — But if we rely on its employment in the more active ~~cases~~, and profuse hemorrhagies from the lungs, we shall uniformly fail, and shall be very fortunate if we do not sacrifice the life of the patient.

It is now ~~&~~ nearly half a century, since emetics were recommended in this disease by Brian Robinson ~~of Cork~~ Dublin. But the practice has never been much followed, having been tried sparingly by Cullen & abandoned, on account of its injurious effects. ~~&~~ There can be no

doubt, however, but that emetics sometimes check hemorrhage from the lungs. I have seen spontaneous vomiting produce this effect, & in one case, the worst I have ever met with, the discharge was stopped by administering an emetic. But I consider the practice hazardous, & would never employ it unless in extreme cases, & where milder methods had proved unavailing. I speak with reference to copious hemorrhage, in consequence of the rupture of some large vessel. But when there is only a slight ~~[illegible]~~ discharge, especially when it is connected with tubercles in the lungs, emetics are perfectly safe, & sometimes produce the best effects. They direct the blood from the lungs, establish an equable circulation, remove cutaneous constriction, calm the general condition of the system, and lessen the anxiety, cough, sanguineous expectoration, & difficulty of respiration. In this way we are enabled to imitate the effects of a sea-voyage, which has often proved of so much utility.—

L. 17

I mentioned in my last lecture that emetics had been introduced into the treatment of Haemptysis by Brian Robinson of Dublin. The practice, however, was laid aside on account of its temerity. Nevertheless it is most certain, that active vomiting in some instances promptly suppresses copious hemorrhage from the lungs, and especially when the vomiting is spontaneously induced. My own personal experience supplies me with cases of this kind, & many more may be collected from medical records. But still the practice must be considered as temerarious, & only to be employed in cases of great emergency, & where other remedies have been used in vain. Condemning as I do the custom of prescribing emetics in the early stage of Haemptysis, I cordially concur with the almost universal opinion of their utility, when administered in small and nauseating doses. Perhaps there is not one of this class of medicines, which is not beneficial when thus employed. The Emetic Tartar ~~is most used~~ has been much used, and undoubtedly with considerable advantage.

It has often been prescribed by me, and particularly in the febrile haemoptysis, to which all these ~~are~~ articles are best adapted. To the vast powers of one of the preparations of Sulphate of Zinc, (the vitriolic solution,) in these cases, the testimony of Mosely & the late Dr. Barton is so strong, and unreserved. My own knowledge enables me to say nothing in its favour. I have never tried it, not even in a single case. But with that sort of confidence which results from extensive experience, I can recommend ipecacuana as a most important remedy under such circumstances. I have used it a number of times, and in a variety of cases, and have invariably experienced effects which satisfy me ~~as~~ of its valuable properties. It should be given so as to create slight nausea, which is to be continued for the length of 8, 10, or 24 hours. My own mode is to give 2 grs. of ipecacuana with ½ a gr. of opium, repeat at a longer or shorter interval, according to the apparent necessity of the case. Of its method of operating I shall say something presently.

I have already remarked that the articles denominates Refrigerants are one of the means appropriated to the cure of Pulmonary Hemorrhage. The whole of the neutral salts are of this description; but the most valuable is the nitrate of potash, or the common nitre. No remedy, perhaps, is ~~of~~ more prescribed than this; and hence it is often vaguely employed. It has not, in the slightest degree, the power of directly restraining hemorrhage, or of astringing the mouths of the bleeding vessels. The remedy is wholly useless while the blood continues to flow copiously; but it is far more efficacious in diminishing the vascular action and reducing febrile ~~[illegible]~~ heat; and in this way ~~acting~~ ~~act~~ operates as an important auxilliary to the lancet. Nitre may be given alone, or, what will answer very well, combined with the antimonial preparations in minute doses.

Not altogether dissimilar in use & properties to the preceding article, are the mineral acids. They are prescribed with the same view, though there is some reason to suspect

that they are more astringent, and hence they are resorted to, in order at once to suppress haemoptysis. Whether they possess such a power to any great extent, I cannot say positively. But of this I am assured, that with the evidence before us, we should not rely on them to the exclusion of the several articles detailed to you, the efficacy of which is incontestibly established. Of the mineral acids, by far the most efficacious in the property of restraining the flow of blood, is the Sulphuric. It may be given in the dose of 15, 20, or 30 drops, every half hour or hour, or, what will answer as well, in the form of elixir vitriol.

To the remedies already mentioned we may add several others, the utility of which is fully accredited. It is to the narcotics that I allude. On a former occasion I noticed Digitalis, (which is generally associated with this class,) and indicated the cases to which it is applicable. Cicuta, Henbane, ~~Hemlock~~, Opium are also strongly recommended in this form of ~~haem~~ hemorrhage. The practice originated in Germany, & was ~~lately intro-~~

offered and introduced into England. The principle is obviously to quiet irritation, and to induce arterial action by the supposed sedative influence of these articles. No striking advantage results from the use of Hemlock or Henbane; but opium sometimes proves very beneficial. What would be the effect of a large dose of this latter article, is ~~very~~ problematical in my estimation. That opium does good thus prescribed, we are not without direct proof. It ~~was~~ would be easy to cite many cases which have been relieved by this remedy. Nor is the collateral evidence to the same point altogether to be overlooked. It is ascertained that one of the most effectual ways of managing uterine Hemorrhage, is to put the system completely under the operation of an opiate. But it may be asked, is not opium a stimulant, and will it be proper to employ an article of this kind, when the system is already too much excited? To this it may be replied; does not every Surgeon after an operation, to quiet his patient, resort to an opiate, though there should be a

high degree of vascular action at the time. The fact is that in speculating on this remedy, we should bear in mind, that its properties are peculiar. Most unequivocally opium is a stimulant. To this point we have evidence conclusive & irresistable. But its stimulant power is so tempered by its other properties, as of assuaging pain, & doing away irritation, that in many instances it is effectually disguised, and the remedy ~~will~~ may prove safe & efficacious, where, acting on general principles, its use would seem to be totally prohibited. Nevertheless, I am not prepared to vindicate the propriety of the practice just stated. My experience is too narrow to allow of my forming any decisive opinion. When I have directed opium in hæmptysis, it has been in those cases in which there existed great irritation of the Pulmonary organs, attended commonly with cough. No one disputes that opium is called for under these circumstances, though at the time there may be ~~indications~~ considerable indications of arterial action. Irritation of the lungs, & more particularly

cough, has the effect of keeping up the discharge of blood. By doing away these, we shall succeed, in many instances, in effectually terminating the hemorrhage. This I have witnessed in various cases of hæmoptysis. –

~~In the commencement~~ As connected with this general course of treatment, some local applications are of too great consequence to be neglected. I before mentioned the utility of cloths wet with cold water, & applied to the thorax, ~~and~~ particularly to the arm pits. ~~At~~ But when the hemorrhage depends on irritation, or even a strong tendency to this state of things exists, we should resort to the vesicating applications. Medical men do not exactly agree as to the precise place in which we are to apply the blisters. It is alledged by some that they are infinitely more efficacious when applied to the wrists and ankles, than to any other part. Others contend that they do best when on the back of the neck. The majority, however, of physicians are united as to the propriety of applying blisters to the chest under such circumstances.

As regards myself I have not the least doubt, that the last is the proper part. Indeed, it is a point of practice sufficiently established, that the effect of all such applications, whatever may be the nature of the case, is exactly proportionate to their proximity to the seat of disease. But there is one exception to this general rule; when we wish to interrupt associations, or morbid catenations of actions. With this view, blisters to either of the extremities, are more operative & beneficial than on the trunk of the body. Too much cannot be said of the utility of blisters in hæmptysis. It is within the experience of almost every practitioner, how great is their assistance in effecting a cure of this disease. In more than one instance, I have seen hemorrhage from the lungs, which continued after the employment of all the remedies previously mentioned, at once arrested by the application of a blister to the chest. It would be easy to cite great authority in favour of the remedy, and the practitioners of this city give their testimony

*(Insert.) The mere asking of a question has been known to induce a return of the flow of blood.

to its utility.—

As I have stated, such is the practice which has been found best adapted to relieve hemorrhage from the lungs. But that it may be effectual, it is necessary that we should pay attention also to other circumstances. 1st. The moment that you are consulted in ~~the~~ a case of this nature, you should direct the patient to be kept in a state of complete rest in bed, with his shoulders somewhat elevated. 2nd. The chamber should be very cool, & freely ventilated. This is a matter of great consequence. ~~3rd.~~ It is also proper that ~~the~~ company should be entirely excluded, and the patient not permitted to inquire into any ~~circumstance~~ event that may occur.* ~~4th.~~ 3rd. The diet, under such circumstances, should consist of small portions of demulcent drinks, agreeably acidulated. It is essentially necessary that ~~the stomach~~ should never be loaded with aliment or drink. 4th. It is a matter of considerable importance, that the bowels should constantly be kept soluble, though no great advantage would result from active purging.

But in place of active hemorrhagic discharge we sometimes meet with cases of an opposite description; I allude to Passive hemorrhages*, or that of feeble action. Whether such ~~be~~ may have been the state of the case originally, or the excitement have been reduced by previous treatment, exactly the same course of practice is to be pursued. Evacuations, and other debilitating measures must be prohibited. The indication here is to support the tone of the system, and through it to impart tone to the blood-vessels. To attain this end, it is requisite to resort to the different tonics, among which the Peruvian Bark has always maintained a high reputation. Every practitioner ~~can~~ has confidence in its utility, and some are even enthusiastic in its praises:- Among these was the late ~~Dr Rush~~ Dr. Rush. It is the common practice to prescribe the bark alone; though its powers are undoubtedly improved by combination with the chalybeate preparations. Of the great efficacy of these articles there is every reason to be convinced. The vegetable astringents are also occa=

tionally employed, and particularly Kino & Catechu. But determining from my own experience, I should attach little importance to them in the management of hemorrhage from the lungs. Much more advantage may be derived from the use of the mineral acids. To such cases they are better suited, that to those instances of Haemptysis which are accompanied with a febrile disposition. Either of the mineral acids will answer sufficiently well for the purpose. If we wish only to restrain the flow of blood, the sulphuric is the better remedy. But if the flow of blood is associated with a tuberculous or scrofulous condition of the lungs, and so slight as not to call for immediate suppression, more advantage is to be derived from the nitric acid. Hemorrhage often accompanies Pulmonary Consumption, & of all the remedies employed in this case, nitric acid is decidedly the most efficacious. These are the principal medicines employed in the fable

or passive hemorrhage. But they should be accompanied by ~~by~~ the habitual use of moderate exercise, by a nourishing diet, and by such drinks as corroborate, ~~the~~ without heating or stimulating the body. The best are malt liquors, and of these the one to be preferred is, perhaps, porter. It is a circumstance curious, & worthy of your recollection that by the habitual use of porter, the weaker shapes of ~~hemorrh~~ hemoptysis have again & again been cured. Cases of this kind have come under my own observation, and it is stated by Dr. Rush that porter often displays great powers over this disease. ~~By~~

By pursuing the course thus laid down, accomodating your remedies to the particular circumstances of the case, you will generally succeed in accomplishing a cure. But unhappily, in most instances of hemoptysis, especially when connected with a constitutional affection, there is a high degree of liability to recur from slight provocation. To guard against this event, a system of precepts should be carefully given, and by the patient should be unremittingly pursued.

The 1st. Rule is to avoid every circumstance which would give an increased impulse to the ~~blood~~ circulation. Hence we should direct a diet of mild articles, as milk, together with ~~moderate~~ gentle exercise, and a religious abstinence from exciting causes of every kind.

The 2nd. Rule is, ~~to avoid every possible pre~~ by every possible precaution, to avoid taking cold. Nothing is so apt to produce a repetition of the hemorrhage as catarrh. When thus reproduced, it is often extremely obstinate, and is ~~often~~ followed by serious consequences.

3rd. In cases where there is a strong predisposition to the disease, the state of the chest and of the pulse should be accurately observed. Pain or oppression in the thorax, or any ~~good~~ unusual activity of the circulation affords sufficient ground for apprehension, and the remedies should be employed with diligence. To accomplish the end demanded, you should recommend small bleedings, a diet still lower than that previously employed, a state of complete rest, with some cooling medicine, as the neutral salts. ~~Much~~

4th. Much good may here be derived from blisters. When there is much local affection these should be applied to the chest. Under other circumstances they should be put on the wrists or ankles, in which case they act by revulsion.

5th. On the same principle, salivation should be tried in obstinate cases of this nature. There is an influx by this means produced into the mouth, by which the blood is diverted from the lungs. On a more general principal, the revolutionizing power of the mercury supplants the disease, and substitutes its own peculiar action for that going on in the Pulmonary organs.

6th. As a means of prevention, and especially when the tubercles exist, emetics frequently repeated are entitled to great confidence. They have been much used, and with not no little advantage. As I observed on a former occasion, they act by removing blood from the lungs, & establishing a regular and equable circulation; by relieving cough & oppression; and by dislocating, as it were the disease from its seat, & leaving to nature & our remedies a more easy cure.

Cases, however, occur which are extremely obstinate, and seem to be so implanted in the very texture & constitution of the lungs, that they resist the best concerted plan of treatment. Consulted in such cases, you should advise as a dernier resource, the removal to a warm climate, and, if practicable, that ~~so~~ the patient be conveyed to such a climate by sea. It is true that even this often fails. But there is abundant testimony to satisfy us, that now & then cures of ~~hemorrhages~~ hemoptysis have been effected by a sea voyage, and the effects of an equable & temperate climate. But even if it is but only of occasional advantage, we are most undoubtedly justified in recommending it as the only resource. It is a rule of universal application, ~~that~~ which cannot be too often presented to you, nor too unremittingly pursued, that precisely as our embarrassments increase, in the same proportion should our exertions be invigorated to combat the disease. We know that by this means cures have been effected in cases which were appa=

rently desperate; and under no circumstances whatever, should we consider that any thing has been done, while any thing remains to be accomplished.

— Ola —

To tame the humour of the maids

Sooth'd the [illegible] pangs his aged spirit felt,
And on his [illegible] mute attention dw[illegible]
As in his serv[illegible] dropp'd my little store,
And wept to [illegible] that little was no more,
He breath'd [illegible] prayer, "Long may such goodness live!"
'Twas all he gave, 'twas all he had to give.

Epitaph on a young Woman.

In dawn of life she wisely sought her God;
And the straight path of thorny virtue trod.
Fond to oblige, too gentle to offend;
Belov'd by all, to all the good a friend:
The bad she censur'd by her life alone;
Blind to their faults, severe upon her own:
In others' griefs a tender part she bore;
And with the needy shar'd her little store:
At distance view'd the world with pious dread;
And to God's temple for protection fled:
Where sought that peace which Heav'n alone can give,
And learn'd to die ere others learn to live.

CHAPTER II.

NARRATIVE PIECES.

SECTION I.

The Looking glass; or, ill-humour corrected.

THERE was a little stubborn dame,
Whom no authority could tame;
Restive by long indulgence grown,
No will she minded but her own:
At trifles oft she'd scold and fret;
Then in a corner take a seat,
And sourly moping all the day,
Disdain alike to work or play.
Papa all softer arts had tried,
And sharper remedies applied:
But both were vain; for ev'ry course
He took, still made her worse and worse.
Mamma observ'd the rish lass,
Stealin retiring to the glass,
[illegible] practise little airs and [illegible]
[illegible] the true genius of thirteen: